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Debtor 2 (Spouse, if filing)	First Name First Name ruptcy Court for the:	Middle Name Middle Name Northern District o	Last Name Last Name	Check if this is an amended p and list below the sections of plan that have been changed
(Spouse, if filing)				
United States Bankı	ruptcy Court for the:	Northern District o	· Illinois	
			: Illinois	
			(state)	
Case number (if known) 19	-15104			
Official Fo	rm 112			
Jiliciai i C				

Chapter 13 Plan

12/17

Part 1: Notices

To Debtors:

This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances or that it is permissible in your judicial district. Plans that do not comply with local rules and judicial rulings may not be confirmable.

In the following notice to creditors, you must check each box that applies.

To Creditors:

Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.

You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one.

If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file an objection to confirmation at least 7 days before the date set for the hearing on confirmation, unless otherwise ordered by the Bankruptcy Court. The Bankruptcy Court may confirm this plan without further notice if no objection to confirmation is filed. See Bankruptcy Rule 3015. In addition, you may need to file a timely proof of claim in order to be paid under any plan.

The following matters may be of particular importance. **Debtors must check one box on each line to state whether or not the plan includes** each of the following items. If an item is checked as "Not Included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.

1.1	A limit on the amount of a secured claim, set out in Section 3.2, which may result in a partial payment or no payment at all to the secured creditor	Included	✓ Not included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section 3.4	Included	✓ Not included
1.3	Nonstandard provisions, set out in Part 8	Included	✓ Not included

Part 2: Plan Payments and Length of Plan

2.1 Debtor(s) will make regular payments to the trustee as follows:

\$750.00 per month for 60 month(s)

If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

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Debto	r 1 Tarhonda		Jones	Case number	19-15104		
	First Name	Middle Name	Last Name	(if known)			
2.2	Regular payments to the	trustee will be made from future incom	e in the following ma	anner:			
	Check all that apply.						
	Debtor(s) will make pa	yments pursuant to a payroll deduction ord	er.				
	Debtor(s) will make par	yments directly to the trustee.					
	Other (specify method	of payment):					
2.3	Income tax refunds.						
	Check one.						
	Debtor(s) will retain an	y income tax refunds received during the pla	an term.				
		ne trustee with a copy of each income tax rerefunds received during the plan term.	turn filed during the p	lan term within 14 da	ys of filing the ret	urn and will t	urn over to the
	Debtor(s) will treat inco	ome tax refunds as follows:					
2.4	Additional payments.						
	Check one.						
	✓ None. If "None" is che	ecked, the rest of § 2.4 need not be comple	ted or reproduced.				
2.5	The total amount of esting	mated payments to the trustee provided	for in §§ 2.1 and 2.4	is \$45,000.00			
Par	t 3: Treatment of S	acured Claims					
Га	Treatment of S	ecureu Ciairris					
3.1	Maintenance of payment	s and cure of default, if any.					
	Check all that apply. None. If "None" is che	ecked, the rest of § 3.1 need not be comple	ted or reproduced.				
	contract and noticed in below. Any existing an otherwise ordered by t contrary amounts liste stated below are contr by the court, all payme	ntain the current contractual installment paying conformity with any applicable rules. These rearage on a listed claim will be paid in full the court, the amounts listed on a proof of dibelow as to the current installment payme olling. If relief from the automatic stay is orcents under this paragraph as to that collaters umn includes only payments disbursed by the conformatic stay is orcents.	e payments will be dis prough disbursements claim filed before the fil ent and arrearage. In the ered as to any item of al will cease, and all se	bursed either by the by the trustee, with ling deadline under B e absence of a contracollateral listed in this cured claims based o	trustee or directly Interest, if any, at the ankruptcy Rule 30 ary timely filed prospersorations, then,	by the debtoom the rate state 102(c) contro of of claim, t unless other	r(s), as specified d. Unless I over any he amounts rwise ordered
	Name of creditor	Collateral	Current installm paymen (includir escrow)	t any) ng		Monthly plan payment on arrearage	Estimated total payments by trustee
	Bank of America National	18028 Greenview Terrace, Country Club	HIIIs, IL \$1,569.	00 \$26,787.0	0 0.00%	\$583.00	\$26,787.00
	Assoc	60478-0000	<u> </u>	φ20,707.0	0.00 70	φοσο.σσ	φ20,707.00
			Disburs	ed by:			
			☐ Tru	stee			
			✓ Deb	otor(s)			
	ALLY FINANCIAL	Chevy Equinox 2015	\$519.00	\$0.00	0.00%	\$0.00	\$0.00
			Disburs	ed by:			

Trustee✓ Debtor(s)

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Debtor 1	Tarhonda		Jones	Case number	19-15104	
	First Name	Middle Name	Last Name	(if known)		

3.2 Request for valuation of security, payment of fully secured claims, and modification of undersecured claims.

Check one.

None. If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.

3.3 Secured claims excluded from 11 U.S.C. § 506.

Check one.

None. If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

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 Debtor 1
 Tarhonda
 Jones
 Case number (if known)
 19-15104

3.4 Lien avoidance.

Check one.

None. If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.

3.5 Surrender of collateral.

Check one.

None. If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

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Debto	or 1	Tarhonda		Jones	Case number	19-15104	
Pai	rt 4:	First Name Treatment of Fees ar	Middle Name nd Priority Claims	Last Name	(II KIOWII)		
4.1	Genera	al	-				
	Trustee	· ·	ity claims, including domestic s	support obligations other	than those treated in	n § 4.5, will be paid in full	without postpetition
4.2	Truste	e's fees					
		e's fees are governed by state hey are estimated to total \$2	tute and may change during the 2,430.00	e course of the case but a	are estimated to be 5	5.40% of plan payments;	and during the plan
4.3	Attorn	ey's fees					
	The ba	lance of the fees owed to the	ne attorney for the debtor(s) is e	estimated to be \$3,650.00	<u>)</u>		
4.4	Priorit	y claims other than attor	ney's fees and those treated	in § 4.5.			
		one. If "None" is checked, t	the rest of § 4.4 need not be co al amount of other priority claim	•			
4.5	Domes	stic support obligations a	ssigned or owed to a governi	mental unit and paid les	ss than full amount		
	Check		he rest of § 4.5 need not be co	mpleted or reproduced.			
Pai	rt 5:	Treatment of Nonpri	ority Unsecured Claims				
5.1	Nonpri	iority unsecured claims n	ot separately classified.				
		d nonpriority unsecured clain nt will be effective. <i>Check a</i>	ms that are not separately class Il that apply.	sified will be paid, pro rata	. If more than one o	ption is checked, the opti	on providing the largest
		e sum of					
	_		t of these claims, an estimated oursements have been made to	· · · —	ed for in this plan		
	<u> </u>	ic rands remaining after dis	Jansonnonto nave Deen Made to	an other deditors provide	od for ill tills platt.		

If the estate of the debtor(s) were liquidated under chapter 7, nonpriority unsecured claims would be paid approximately \$0.00 Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least this amount.

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Debto			001100	Case number	19-15104	
	First Name	Middle Name	Last Name	(if known)		
5.2	Maintenance of payments an	d cure of any default on nonprior	ity unsecured claims. Ch	eck one.		
	None. If "None" is checked	d, the rest of § 5.2 need not be com	pleted or reproduced.			
	payment is due after the fin	the contractual installment payment nal plan payment. These payments v ount will be paid in full as specified b ne debtor(s).	vill be disbursed either by t	he trustee or direc	ctly by the debtor(s), as specified b	pelow. The
	Name of creditor	Current installment payment	Amount of arreard to be paid	age	Estimated total payments by trustee	
	ASCENDIUM	Disbursed by:	<u>\$0.00</u>		<u>\$0.00</u>	
		Trustee Debtor(s)				
5.3	Other separately classified n	onpriority unsecured claims. Che	eck one.			
	▼ None. If "None" is checked, the rest of § 5.3 need not be completed or reproduced.					

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Debto	or 1	Tarhonda	No. 1 ii N	Jones	Case number	19-15104	
Par	t 6:	First Name Executory Contra	Middle Name acts and Unexpired Leases	Last Name	(II KIIOWII)		
· G	. 0.	Excountry Contro	and onexpired Leades				
6.1		ecutory contracts ar red leases are reject	nd unexpired leases listed below a led. <i>Check one.</i>	re assumed and will	be treated as specifi	ed. All other executory contra	cts and
	✓ No	ne. If "None" is check	red, the rest of § 6.1 need not be con	npleted or reproduced	<u>.</u>		
Par	t 7:	Vesting of Proper	rty of the Estate				
7.1	Proper	ty of the estate will	vest in the debtor(s) upon.				
	Check	the applicable box:					
	pla	n confirmation.					
		try of discharge					
	oth	ner					
Par	t 8:	Nonstandard Pla	n Provisions				
8.1	Check	"None" or List Nons	tandard Plan Provisions				
	✓ No	ne. If "None" is check	ed, the rest of Part 8 need not be con	mpleted or reproduced	<i>1.</i>		
Par	t 9:	Signature(s):					
9.1	Signati	ures of Debtor(s) and	Debtor(s)' Attorney				
	Debtor(s pelow.	s) do not have an attor	ney, the Debtor(s) must sign below; o	otherwise the Debtor(s	s) signatures are option	al. The attorney for the Debtor(s)	, if any, must
~	Signa	ture of Debtor 1			anature of Debtor 2		
				•			
	Execu	ted onMM	/ DD / YYYY	EX	ecuted onN	IM / DD / YYYY	
×	/s/ Sar	ah Lentes		Da	to	5/25/2019	
	Signa	ture of Attorney for De	btor(s)			IM / DD / YYYY	

By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.

Exhibit: Total Amount of Estimated Trustee Payments

The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control.

a.	Maintenance and cure payments on secured claims (Part 3, Section 3.1 total)	\$26,787.00
b.	Modified secured claims (Part 3, Section 3.2 total)	\$0.00
C.	Secured claims excluded from 11 U.S.C. § 506 (Part 3, Section 3.3 total)	\$0.00
d.	Judicial liens or security interests partially avoided (Part 3, Section 3.4 total)	\$0.00
e.	Fees and priority claims (Part 4 total)	<u>\$6,680.00</u>
f.	Nonpriority unsecured claims (Part 5, Section 5.1, highest stated amount)	<u>\$472.00</u>
g.	Maintenance and cure payments on unsecured claims (Part 5, Section 5.2 total)	\$0.00
h.	Separately classified unsecured claims (Part 5, Section 5.3 total)	\$0.00
i.	Trustee payments on executory contracts and unexpired leases (Part 6, Section 6.1 total)	\$0.00
j.	Nonstandard payments (Part 8, total)	+ \$0.00
	Total of lines a through j	\$33,939.00